

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		10-03-00
O.I.P.E. CLASSIFIER		10	10-11-00
FORMALITY REVIEW	NJK		11/08/00
RESPONSE FORMALITY REVIEW	JM	657	3/27/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	12/9/02
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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14	✓
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37	✓
38	✓
39	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	12/9/02
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
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97	✓
98	✓
99	✓
100	✓

Claim	Date
Final Original	12/9/02
101	✓
102	✓
103	✓
104	✓
105	✓
106	✓
107	✓
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110	✓
111	✓
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135	✓
136	✓
137	✓
138	✓
139	✓
140	✓
141	✓
142	✓
143	✓
144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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Form PTO-4
 (Rev. 6-99)